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PETITION FOR EXTENSION OF TIME UNDER 37 CFR	.136(a) Docket Number (Optional)
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4	2132.113 818).)
Application Number 10/032,229	Filed 12/20/2001
For Diagnosis and treatment of dementia utilizing thrombospondin	
Art Unit 1649	Examiner Kimberly A. Ballard
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.	
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):	
Fee	Small Entity Fee
One month (37 CFR 1.17(a)(1)) \$120	\$60 \$ <u>60.00</u>
Two months (37 CFR 1.17(a)(2)) \$450	\$225
Three months (37 CFR 1.17(a)(3)) \$102	\$510 \$
Four months (37 CFR 1.17(a)(4)) \$159	\$795 \$
Five months (37 CFR 1.17(a)(5)) \$216	\$1080 \$
Applicant claims small entity status. See 37 CFR 1.27.	
A check in the amount of the fee is enclosed.	
Payment by credit card. Form PTO-2038 is attached.	
The Director has already been authorized to charge fees in this application to a Deposit Account.	
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1803 . I have enclosed a duplicate copy of this sheet	
WARNING: Information on this form may become public, Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.	
I am the applicant/inventor.	
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).	
attorney or agent of record. Registration Number 43,377	
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34	
Lovie 1. Conder 5/15/2007	
Signature Date	
Ferris H. Lander	(561) 625-6575
Typed or printed name	Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	
Total of forms are submitted. his collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the	

This collection of information is required by 3 CFR 1.13(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USFTO by process) an application. Confidentially is governed by \$5 U.S. C. 12 and 3 CFR 1.11 and 1.1. This collection is estimated to take for minutes to complete, including gathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the abount of time pure require to complete this form and/or suggestions for reducing this bursen, should be sent to the Clief Information Officer, U.S. Patert and Trademark Office, U.S. Patert and Trademark Office, U.S. Patert and Trademark Office, U.S. Patert and Trademark Office. The Commissioner for Patients, P.O. Box 1.450, Alexandra, V.A. 2231-3140.

DNOTES THE THIS ADDRESS SERTO IT Commissioner for Patients, P.O. Box 1.450, Alexandra, V.A. 2231-3140.